

**Application Data Sheet****Application Information**

Application Type::	Regular
Subject Matter::	Utility
Title::	Management of Ophthalmologic Disorders, Including Macular Degeneration
Attorney Docket Number::	HMV-091.02
Total Drawing Sheets::	19
Small Entity?::	No
Licensed US Govt. Agency::	NIH
Contract or Grant Numbers::	R01-EY-04096

**Applicant Information**

Applicant Authority type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Robert R.
Family Name::	Rando
City of Residence::	Brookline
State or Province of Residence::	MA
Country of Residence::	United States of America
Street of mailing address::	65 Glen Road, Apt. H-6
State or Province of mailing address::	MA
Country of mailing address::	United States of America
Postal or Zip Code of mailing address::	02445-7770

**Correspondence Information**

Correspondence Customer Number::	58475
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**Representative Information**

Representative Customer Number::	58475
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**Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This application	National Stage of	PCT/US2005/004990	02/17/05
PCT/US2005/004990	An application claiming the benefit under 35 USC 119(e)	60/545,456	02/17/04
PCT/US2005/004990	An application claiming the benefit under 35 USC 119(e)	60/567,604	05/03/04
PCT/US2005/004990	An application claiming the benefit under 35 USC 119(e)	60/578,324	06/09/04